Traumatic Brain Injury -- Hospital Discharges

MASSACHUSETTS RESIDENTS

	INJURY INTENT							
	Uninten-	Intentional		Undeter-	Other &	Total	Percent	Rate per
INJURY CAUSE	tional	Self- Inflicted	Assault	mined	Legal ¹	Number	of Total	100,000 ²
Cut/pierce	4	1	13	0	0	18	0.4	0.3
Drowning/submersion	4	0	0	0		4	< .1	
Fall	2,676	2	1	4		2,683	58.3	41.8
Fire/flame	0	0	0	0		0	0.0	
Firearms	3	0	7	1	1	12	0.3	0.2
Machinery	7					7	0.2	0.1
Natural/environmental	7	0		0		7	0.2	0.1
Overexertion	1					1	< .1	
Poisoning	6	4	0	4	0	14	0.3	0.2
Struck by, against	150		203		1	354	7.7	5.5
Suffocation/hanging	1	1	1	0		3	0.1	
Transport Injuries:	1,528	2	1	0	0	1,531	33.2	23.9
Motor vehicle traffic-related	1,325	2	1			1,328	28.8	20.7
Occupant	909					909	19.7	14.2
Motorcyclist	130					130	2.8	2.0
Pedal Cyclist	67					67	1.5	1.0
Pedestrian	190					190	4.1	3.0
Other person	12					12	0.3	
Unspecified person	17					17	0.4	0.3
Pedal cyclist, other	95					95	2.1	1.5
Pedestrian, other	9					9	0.2	0.1
Other transport Other specified & classifiable	99 26	2	16	0	0	99 44	2.1 1.0	1.5 0.7
•	17	2	14	0	0	34	0.7	0.7
Other specified, not classifiable	72	0	60	4				
Unspecified	72	0	60	4	0	136	3.0	2.1
Adverse effects ³						65	1.4	1.0
No cause or intent provided						81	1.8	1.3
TOTALS⁴	4,502	14	316	14	2	4,994	100%	77.8
RATE BY INTENT/per 100,000	70.2	0.0	4.9	0.2	0.0			

Source: Massachusetts Hospital Discharge Database, MA Division of Health Care Finance and Policy.

- —Injury hospitalization cases transferred to another acute care facility or subsequently dying in the hospital, are excluded from this analysis.
- —Only Massachusetts residents with valid MA zip codes are included in this analysis.
- —Population data used to calculate rates are based on 2004 population estimates released August 11, 2005 by the US Census Bureau. Estimated 2004 Massachusetts population is 6,416,505.
- —Categories and groupings are based on a modified version of the CDC's "Recommended framework of E-code groupings for presenting injury mortality and morbidity data." This framework does not provide for intentionality for certain cause categories as indicated by gray shading.
- —Injury subcategories are italicized.
- —Data were extracted and compiled by the Injury Surveillance Program, Center for Health Information, Statistics, Research & Evaluation, MDPH, February 2006.

^{*}All data sets from Health Care Finance and Policy are based on a fiscal year. The numbers provided here are based on fiscal year: October 1, 2003 - September 30, 2004 and will be different than numbers generated through the Department's query based system MassCHIP.

¹ Legal Intervention includes injuries resulting from police actions and operations of war.

² Rates are not calculated on counts of less than five. Rates that are based on counts less than twenty may be unstable. Rates provided here are not age-adjusted and may differ slightly from other department publications.

³ Adverse Effects can be related to medical and surgical care procedures, or to the use of therapeutic substances (including allergic reactions).

⁴ Totals do no include subcategory counts. Total percent is presented here as 100% but may be slightly less or more due to rounding.

[—]An injury hospitalization is defined as any case having an ICD9-CM Nature of Injury Code of 800-999 assigned to any of the ICD9 diagnosis fields [cases having the following codes are excluded if no other valid ICD9-CM code is assigned: Certain Adverse Effects (995.0-995.4, 995.6,995.7, 995.86, 995.89), Complications of Surgical & Medical Care (996-999), and certain Late Effects (909.3,909.5)]